

**RC-1-A Cigarette Tax Stamp Order-Invoice****Read this information first**

- Orders will be filled at your assigned location only:

101 W JEFFERSON ST

- or -

CONCOURSE 300

PO BOX 19018

100 W. RANDOLPH ST

SPRINGFIELD IL 62794-9018

CHICAGO, IL 60601-3274

- Payment must be made by means of Electronic Funds Transfer (EFT).
- The Illinois Department of Revenue is not responsible for stamps lost in transit.
- If you need assistance, call our Springfield office at 217 785-6613 or 217 524-5409 or our Chicago office at **312 814-3225**.

**Step 1: Provide your information**

Name: \_\_\_\_\_ Illinois business tax number (IBT no.): \_\_\_\_\_

Street address: \_\_\_\_\_ License number: \_\_\_\_\_

City

State

ZIP

**Step 2: Tell us your order by multiplying the number of stamps you need by the stamp price****20 cigarettes per package** - Order **machine** stamps in rolls (30,000 per roll)1 Number of rolls \_\_\_\_\_ X **30,000** = Number of stamps \_\_\_\_\_ X **.98** = **1** \_\_\_\_\_**25 cigarettes per package** - Order **machine** stamps in rolls (4,800 stamps per roll)2 Number of rolls \_\_\_\_\_ X **4,800** = Number of stamps \_\_\_\_\_ X **1.225** = **2** \_\_\_\_\_**Step 3: Figure the amount due**3 **Add Lines 1 and 2** - Total amount due for stamps. **3** \_\_\_\_\_4 Write the amount of credit you wish to apply. **4** \_\_\_\_\_5 **Subtract Line 4 from 3.** **5** \_\_\_\_\_6 Total purchases from Line 7 of your last order invoice that represents accumulated stamp purchases from July 1. **6** \_\_\_\_\_7 **Add Lines 5 and 6** - Total year-to-date purchase. **7** \_\_\_\_\_**Use the worksheet on the back of this form to figure your discount**8 Discount amount (from the worksheet) **8** \_\_\_\_\_9 **Subtract Line 8 from Line 5 - pay this amount by Electronic Funds Transfer (EFT).** **9** \_\_\_\_\_**Step 4: Sign below**

I hereby authorize the Illinois Department of Revenue to electronically initiate a funds transfer as payment for purchase of cigarette tax stamps against the bank account that was designated by the business listed above. I certify that I have the authority to authorize this transfer.

Signature of person authorizing electronic funds transfer

Title

Printed name of person authorizing the electronic funds transfer

Date

**Official Use**Picked up by: \_\_\_\_\_ Carrier \_\_\_\_\_ Agent \_\_\_\_\_ **Do not write below this line** Checked by: \_\_\_\_\_

Shipped by: \_\_\_\_\_ Express \_\_\_\_\_ Registered \_\_\_\_\_ Insured \_\_\_\_\_

# Discount Worksheet

Use this worksheet to figure the amount of discount to report on Line 8 of Form RC-1-A, Cigarette Tax Stamp Order Invoice.

**a Amount from Line 5** - Total amount due for stamps minus any credit applied.

**a** \_\_\_\_\_

**b Amount from Line 6** - Total purchases from Line 7 of your last order invoice that represents accumulated stamp purchases from July 1.

**b** \_\_\_\_\_

**c Amount from Line 7** - Total year-to-date purchase.

**c** \_\_\_\_\_

**d** If the amount on Line c is \$3,000,000 or less, **multiply Line a by 1.75% (.0175).**

Stop here and write this amount on Line 8 of the order-invoice.

**d** \_\_\_\_\_

**e** If the amount on Line b is more than \$3,000,000, **multiply Line a by 1.5% (.015).**

Stop here and write this amount on Line 8 of the order-invoice.

**e** \_\_\_\_\_

**f Subtract Line b from \$3,000,000.**

**f** \_\_\_\_\_

**g Subtract \$3,000,000 from Line c.**

**g** \_\_\_\_\_

**h Multiply Line f by 1.75% (.0175).**

**h** \_\_\_\_\_

**i Multiply Line g by 1.5% (.015).**

**i** \_\_\_\_\_

**j Add Line h and Line i.**

Stop here and write this amount on Line 8 of the order-invoice.

**j** \_\_\_\_\_